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CLAIMS AS FILED - PART   (Column 1)	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application of Docket Number		
RATE   FEE	CLAIMS AS FILED - PART I							SMALL E	NTITY	OR			
SASIC FEE (07 CFR 1.16(a))   TOTAL	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						RATE	FEE		RATE	FEE		
TOTAL   CALMIS   COLUMN   CO	BASIC FEE							·s	OR		s		
NOBERNOENT CLAIMS   minus 3 =	TOTAL CLAIMS					×	s=		OR	x s=			
MULTIPLE DEPENDENT CLAIM PRESENT   (37 CFR 1.16(d))	INDEF	ENDENT CLAIM	S	minus 3 =		·		s=		OR	x \$=		
It the difference in column 1 is less than zero, enter "0" in column 2.						+	·s =		OR	+ \$=			
CLAIMS AS AMENDED - PART								TOTAL		OR	TOTAL		
Column 1)	- It the									•	•		
CLAIMS   REMAINING   REMAINING   RATE   RATE   ADDITIONAL   FEE	10/22/21 (Setum 2)							SMALL E	ENTITY	OR			
AMENDMENT		20/04	CLAIMS REMAINING		HIGHEST NUMBER PREVIOUSLY	PRESENT			ADDI- TIONAL	] ·		ADDI- TIONAL	
TOTAL ADD'L FEE	MEN		· 27	Minus	PAID FOR	=	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	· =	FEE	OR	x s 18=		
TOTAL ADD'L FEE	S	Independent	. 37	Minus	<del></del> 2	=				OR	x \$=		
Column 1   Column 2   Column 3	AME		ATION OF MULTIPLE	DEPENDE	NT CLAIM (37 CF	R 1,16(d))				OR	+s =		
RATE   ADDITIONAL   FEE     RATE   ADDITIONAL   FEE	This incommon of medical section of the section of						1	TOTAL		OR		PAID	
CLAIMS   REMAINING   RATER   PREVIOUSLY   PAID FOR   PAID FOR   PREVIOUSLY   PAID FOR   PREVIOUSLY   PAID FOR   PAID	(Column 1) (Column 2) (Column 3)								-	_			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))	1 1		CLAIMS REMAINING AFTER		NUMBER PREVIOUSLY			RATE	TIONAL		RATE	ADDI- TIONAL FEE	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			•	Minus	••	=		x s=		OR	x's=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))	N N N	Independent	•	Minus	***	=		x \$=		OR	x \$=		
TOTAL   OR   ADD'L FEE     OR   ADD'L FEE   OR   ADD'L FEE   OR   ADD'L FEE   OR   ADD'L FEE   OR   OR   OR   OR   OR   OR   OR	A							+ \$=		OR			
CLAIMS   HIGHEST   NUMBER   PRESENT   EXTRA   FEE										OR		<u></u>	
O	(Column 1) (Column 2) (Column 3)								- <del></del>	٦		<del></del>	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  + \$ = OR +	1 -		REMAINING AFTER	=e	NUMBER PREVIOUSLY			RATE	TIONAL		RATE	ADDI- TIONAL FEE	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  + \$ = OR +			•	Minus		Ξ	] [	x <b>s</b> =		OR	x s=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  + \$ = OR +	I N	Independent		Minus	•••	=		x \$=		OR	x s=		
	A A									OR			
ADD'L FEE OR ADD'L FEE		<u> </u>						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</li> <li>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</li> </ul>	.	" If the "Highest	t Number Previous	ly Paid For	IN THIS SPACE	is less than 3	onter'			iala hay ia	. column 1		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number round in the appropriate box in Courna 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.